

U.S. Department of Energy

Los Alamos National Laboratory

(Facility or Installation Where Terminated)

Security Termination Statement

NAME AND TITLE (Print all blocks)	EMPLOYER YOU ARE LEAVING
FUTURE RESIDENCE	NAME AND ADDRESS OF FUTURE EMPLOYER
REASON FOR TERMINATION:	
SOCIAL SECURITY NUMBER:	DATE OF BIRTH:
DATE OF TERMINATION:	DOE NUMBER (IF KNOWN)

I make the following statement in connection with the forthcoming termination of my access authorization (security clearance) granted by the U.S. Department of Energy (DOE).

1. In accordance with DOE security regulations, I have destroyed or transferred to persons designated by the DOE all classified documents and material for which I was charged or which I had in my possession.
2. I have returned to a DOE official or person acting for the DOE all security badges, credentials, or other identification or access media issued to me by the DOE or its contractors.
3. I will not reveal to any person any Restricted Data, Formerly Restricted Data, or other classified information of which I have gained knowledge except as authorized by law, regulations of the DOE, or in writing by officials of the DOE empowered to grant permission for such disclosure.
4. I will immediately report to the Federal Bureau of Investigation (FBI) any attempt by an unauthorized individual to acquire classified information from me.
5. I am aware that the Atomic Energy Act of 1954 and U.S. Code, Title 18 "Crimes and Criminal Procedures," prescribe penalties for unauthorized disclosure of Restricted Data, Formerly Restricted Data, and other information relating to the national defense.
6. I am aware that I may be subject to criminal penalties if I have made any statement of material facts knowing that such statement is false or if I willfully conceal any material fact (Title 18, U.S. Code, Section 1001).

(Signature of Person Conducting Interview)

(Signature of Person Whose Access
Authorization is Being Terminated)

(Title of Position)

(Date)

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PRIVACY ACT STATEMENT

Collection of the information requested is authorized by the Atomic Energy Act of 1954, as amended, and by Executive Orders 10450, 10865, and 12356. Disclosure of the information on this form is voluntary; however, your decision not to complete this form could result in a delay in processing any future request for reinstatement of your U.S. Department of Energy (DOE) access authorization (security clearance). Your DOE access authorization can be terminated regardless of whether this form is completed. Your name, Social Security number, and date of birth are used as identifying factors to establish and maintain records of DOE access authorization actions in the DOE System of Records, DOE-42, "Personnel Security Clearance Index," and this form will be maintained in your DOE Personnel Security File (DOE System of Records, DOE-43, "Personnel Security Clearance Files"). Access to these records is permitted as stipulated in DOE 5631.2, "Personnel Security Program," and as listed in Routine Uses in Appendix B to the DOE System of Records.

OMB BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of Information Resources Management, AD-241.2 - GTN, Paperwork Reduction Project (1910-1800), U.S. Department of Energy, 1000 Independence Avenue, S.W., Washington, D.C. 20585; and to the Office of Management and Budget, Paperwork Reduction Project (1910-1800), Washington, D.C. 20503.